



## FULL ANALYSIS

### I. SUBSTANTIVE ANALYSIS

#### A. DOES THE BILL:

- |                                      |                              |  |   |
|--------------------------------------|------------------------------|--|---|
| 1. Reduce government?                | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | N/A <input type="checkbox"/>            |
| 2. Lower taxes?                      | Yes <input type="checkbox"/> | No <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |
| 3. Expand individual freedom?        | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | N/A <input type="checkbox"/>            |
| 4. Increase personal responsibility? | Yes <input type="checkbox"/> | No <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |
| 5. Empower families?                 | Yes <input type="checkbox"/> | No <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |

For any principle that received a "no" above, please explain:

1. The bill requires the Department of Health to expand its certification process for emergency medical technicians (EMTs) and paramedics.
3. The bill requires any person applying for certification as an emergency medical technician (EMT) or paramedic to submit information and fingerprints to the department for purposes of a national and state criminal background check. Some individuals may see this as an invasion of personal privacy.

#### B. EFFECT OF PROPOSED CHANGES:

HB 1461 provides the Department of Health the authority to use interest generated by the Emergency Medical Services Trust Fund for budget items approved by department management. These funds are usually spent for Emergency Medical Services (EMS) grants, trauma care activities, and related administrative expenses.

The bill also changes the certification process for Emergency Medical Technicians (EMTs) and Paramedics. Most significantly, the bill eliminates the requirement that the application for certification be administered under oath, requires the person's certification to be included on any insignia worn by the EMT or Paramedic, and establishes criminal history checks for all applicants and those persons renewing a certification.

#### PRESENT SITUATION

Emergency medical services (EMS) are provided to Floridians by 254 licensed EMS provider services located throughout the state. Each provider service is staffed with emergency medical technicians (EMTs) and paramedics to provide 24 hours per day 7 day a week service to their service area. These services may provide ground, air and/or water transport for patients and may be associated with hospitals, fire departments, city or county governments or private corporations.

The Department of Health's Bureau of Emergency Services oversees the provision of emergency medical services by licensing emergency medical service providers, certifying the credentials of the EMTs and paramedics, establishment of rules and regulations for both services and professionals, and investigations of complaints concerning providers, EMTs, paramedics and EMS training schools.

#### Emergency Medical Services Grants

Part II of ch. 401, F.S., provides for emergency medical services grants. The Emergency Medical Services Trust Fund (EMSTF) receives revenue from certain civil and traffic fines, motor vehicle license taxes, and medical transportation license and certification fees. EMSTF monies are used for Emergency Medical Services (EMS) grants, trauma care activities, and related administrative expenses.

Before a 2001 audit by the DOH's Inspector General Office, grantees were allowed to expend this interest on grant-related budget items per their discretion. However, the Inspector General's audit found that the bureau did not sufficiently monitor or document its review of grantees. As a result, any interest earned from awarded EMS grant funds must be returned to the Department of Health (DOH), which administers the grant, by the grantee with its final grant report.

HB 1461 authorizes the grantees to expend the interest from the EMSTF on budget items approved by the department. However, if the grantee is receiving funds that require a match, they may not expend the interest on any other issue until the match requirements have been met.

This provision may cause a conflict with the state's budgetary process. At present, the interest from these funds reverts to state general revenue. For the last two fiscal years that data is available, the amount of interest generated by these funds was \$419,000 (FY 2000-01) and \$459,500 (FY 2001-02).

### **Certification of Emergency Medical Technicians and Paramedics**

Part III, chapter 401, F.S., provides for the regulation of emergency medical technicians (EMTs) and paramedics by the Department of Health (DOH). Any person who wishes to be certified as an EMT or paramedic must apply to DOH under oath on forms provided by the department which must contain such information as the department requires, which may include affirmative evidence of ability to comply with applicable law and rules. An applicant for certification or recertification as an EMT or paramedic, as appropriate, must have completed the most recent EMT training course or paramedic training course of the United States Department of Transportation as approved by DOH; certify under oath that he or she is not addicted to alcohol or any controlled substance; certify under oath that he or she is free from any physical or mental defect or disease that might impair the applicant's ability to perform his or her duties; and within 1 year after course completion have passed an examination developed or required by DOH.

In addition, for an EMT, the applicant must hold either a current American Heart Association cardiopulmonary resuscitation course card or its equivalent as defined by department rule. For a paramedic, the applicant must hold a certificate of successful course completion of advanced cardiac life support from the American Heart Association or its equivalent as defined by department rule.

The EMT/paramedic certification examination must be offered monthly. Individuals achieving a passing score on the certification examination may be issued a temporary certificate with their examination grade report. The Department of Health must issue an original certification within 45 days after the examination. Each EMT certificate and each paramedic certificate will expire automatically and may be renewed if the holder meets the qualifications for renewal as established by DOH.

Under s. 401.411, F.S., DOH may deny, suspend, or revoke a license, certificate, or permit or may reprimand or fine any licensee, certificateholder or other person operating under part III, chapter 401, F.S., for specified grounds. Such grounds include: the violation of any rule of DOH or any provision of part III, chapter 401, F.S.; being found guilty of, or pleading nolo contendere to, regardless of adjudication in any jurisdiction, a crime that relates to practice as an EMT or paramedic, or to practice in any other occupation, when operating under part III, ch. 401, F.S.; addiction to alcohol or any controlled substance; the conviction in any court in any state or in any federal court of a felony, unless the person's civil rights have been restored; unprofessional conduct; and the failure to report to DOH any person known to be in violation of the part.

The Department of Health requests EMT/paramedic applicants to disclose any criminal convictions on the certification application. The department has adopted an administrative rule that provides that an applicant for certification or recertification as an EMT or paramedic who has been convicted of a felony and has complied with the requirements of chapter 940, F.S., and provides documentation of

restoration of his or her civil rights shall be certified if the applicant otherwise meets the certification or recertification requirements and no other basis for denial exists.

HB 1461 makes several technical and substantive changes to these certification requirements. Most significantly, the bill removes the requirement that applications for certification are submitted under oath. This is because the bill creates s. 401.27001, F.S., requiring applicants for initial certification and those seeking recertification to submit information and fingerprints for a statewide and national criminal history check. The bill specifies the criminal offenses that are grounds for denial of a certification and requires that a person previously certified must attest to any convictions since the previous certification.

### **Deregulation of Emergency Medical Technicians/Paramedic Patches and Insignias**

Section 401.27 (13), F.S., requires the DOH to adopt, by rule, a standardized insignia and display of the insignia for emergency medical technicians (EMTs) and paramedics. Though the EMT and paramedic insignia currently worn by certified EMTs and paramedics working for licensed EMS providers are commonly accepted as "the patch," no rule identifying a standardized insignia or its display has ever been adopted.

HB 1461 amends s. 401.27, F.S., requiring any insignia to include the specific certification held by the EMT or paramedic wearing said insignia. The Department of Health states that there may be conflicts with other agencies as a result of this provision. Specifically, the department believes that their adoption of certain insignia and rules for display may require the DOH to enforce patch requirements for certificateholders who work for agencies that are neither licensed nor regulated by the DOH, but do participate on scene in as first response agencies.

#### **C. SECTION DIRECTORY:**

**Section 1.** Amends s. 401.113, F.S., authorizing the expenditure of interest generated from the Emergency Medical Services Trust Fund.

**Section 2.** Amends s. 401.27, F.S., authorizes the Department of Health to accept electronically submitted applications from emergency medical technician and paramedic applicants; removes the oath requirement for certification; requires department rules to include a procedure for recognizing cardiopulmonary resuscitation and advanced cardiac life support course equivalency; removes temporary certification provisions; removes obsolete language; limits the class of people who may receive limited certification; and removes the requirement for the department to adopt a state insignia.

**Section 3.** Creates s. 401.27001, F.S., provides for criminal history checks as part of the application requirements for certain certifications; provides duties of the Department of Health, the Department of Law Enforcement, and the Division of State Fire Marshal; requires statewide and national criminal history checks; specifies provisions of law violations that exclude persons from certification; authorizes the Department of Health to grant exemptions under certain circumstances; provides criteria, requirements, and limitations; provides exceptions; and requires the department to adopt rules.

**Section 4.** Amends s. 401.2701, F.S., provides an additional student advisement requirement for certain institutional emergency medical services training programs; and requires the Department of Health to adopt rules.

**Section 5.** Provides an effective date of July 1, 2004.

## II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

### A. FISCAL IMPACT ON STATE GOVERNMENT:

#### 1. Revenues:

There has been no increase in fees for certification of emergency medical technicians (EMTs) and paramedics in the last decade. The fees collected for initial certification and recertification subsidize the cost of regulating emergency medical technicians and paramedics. This includes not only the administrative cost to process applications and issue certificates and denials, but also for the oversight of training programs that provide initial certification and renewal, training, and the enforcement activities of complaint investigation unit. Estimated revenue provided by the Department of Health will come from increased payments submitted with each application to cover costs incurred by the DOH for processing criminal history background checks. The total estimated revenue will be \$221,059 for Year 1, \$240,759 for Year 2, and \$171,531 for Year 3.

#### 2. Expenditures:

The volume of work related to the receipt and submission to FDLE of fingerprint cards and statewide background check information and the tracking, review, and disposition of a criminal history screening represent separate workloads. Once a criminal history is returned to the DOH, the information will require review, request for additional documentation and a determination of either approval or denial. As these tasks are required year-round, career service positions are sought. It is anticipated that a minimum of one regulatory specialist and two investigators could accommodate the increased workload as described. Full time equivalents are calculated as base salary plus 10 percent, a 28 percent fringe cost, and a 25 percent lapse in employment for Year 1.

As the bill calls for a one-time criminal history background screening of current certificateholders, calculations for temporary personnel are based on increased data processing need (each record will require data entry at two different stages of processing), which may be met with temporary employment services. The temporary employee services expense is shown in "year 1" and "year 2" but should not recur beyond year 2. It is estimated that a minimum of two additional regulatory specialists to process renewal related criminal history background screenings will be necessary to handle requests for additional information from the applicant or in the sharing of background check information from other state and local government agencies, preliminary review of background results, referrals to investigators, and the electronic clearing of applications subsequent to criminal history background screening determination.

<b>Estimated Expenditures</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>
<b>Salaries</b>			
Professional	\$25,960	\$34,614	\$34,614
Non-professional	74,314	99,085	99,085
<b>Other Personnel Services</b>			
2 – Non-professionals (Under temporary employment contract)	69,228	69,228	
<b>Expense</b>			
Non-recurring (1 non-professional)	2,603		
Non-recurring (2 professionals)	6,122		
Recurring (1 non-professional)	5,416	5,416	5,416
Recurring (2 professionals)	13,708	13,708	13,708
Recurring travel (2 professionals)	18,708	18,708	18,708
<b>Operating Capital Outlay</b>			
Non-recurring (1 non-professional)	2,000		
Non-recurring (2 professional)	3,000		
<b>Total Estimated Expenditures</b>	<b>\$221,059</b>	<b>\$240,759</b>	<b>\$171,531</b>

For bill analysis purposes, estimates are based on 40,000 unique certificateholders. Approximately 3,000 of the current certificateholders hold both emergency medical technician and paramedic certification and each certificateholder rather than each certificate will require a single criminal history background check.

**B. FISCAL IMPACT ON LOCAL GOVERNMENTS:**

1. Revenues:

None.

2. Expenditures:

Any local government that currently pays fees related to certification for emergency medical technicians and paramedics will experience an increase for every certified employee. During the 2002 renewal cycle, emergency medical services employers paid for approximately 57 percent of renewals. Under the bill's provisions and estimating approximately 40,000 applications for the first renewal cycle, the cost to local government will increase significantly.

**C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:**

Any emergency medical technician or paramedic that must pay for their own certification will incur the increased expenses related to the fingerprinting and criminal history check. This amount is indeterminate at this time.

**D. FISCAL COMMENTS:**

The provision that allows EMS grantees to expend the interest generated by the trust fund may cause a conflict with the state's budgetary process. At present, the interest from these funds reverts to state general revenue. For the last two fiscal years that data is available, the amount of interest generated by these funds was \$419,000 (FY 2000-01) and \$459,500 (FY 2001-02).

The Florida Department of Law Enforcement (FDLE) charges fees to cover the cost of performing background checks and processing national background checks. It is uncertain whether the increase of 40,000 required state and national background checks every other year will be handled through a delayed response or if FDLE will incur additional expenses to maintain their current turnaround times on background checks.

The State Fire Marshal's Office will incur some expense if they are to serve as a clearinghouse for background information for emergency medical technicians and paramedics who are dually certified as Florida firefighters. The Department of Health (DOH) is unable to calculate the impact on that office.

### **III. COMMENTS**

**A. CONSTITUTIONAL ISSUES:**

1. Applicability of Municipality/County Mandates Provision:

This bill does not require counties or municipalities to spend funds or to take an action requiring the expenditure of funds. This bill does not reduce the percentage of a state tax shared with counties or municipalities. This bill does not reduce the authority that municipalities have to raise revenue.

2. Other:

None.

**B. RULE-MAKING AUTHORITY:**

The Department of Health has rulemaking authority necessary to implement the provisions of the bill.

**C. DRAFTING ISSUES OR OTHER COMMENTS:**

The Department of Health states that the adoption of the insignia and rules for display contained in HB 1461 may require the department to enforce patch requirements for certificateholders who work for agencies that are neither licensed nor regulated by the DOH, but do participate on scene as first response agencies.

**IV. AMENDMENTS/COMMITTEE SUBSTITUTE CHANGES**

On March 30, 2004, the Subcommittee on Health Services adopted three amendments and reported the bill favorably to the Committee on Health Care. The three amendments contained the following:

**Amendment #1** – Technical correction to conform to the other provisions of the bill.

**Amendment #2** – Reinstates current statutory language regarding standard state insignia for emergency medical technicians and paramedics.

**Amendment #3** – Removes language that was in conflict with state and federal law enforcement authority.